PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: Prickett Lynne

APN NUMBER	SITE ADDRI	E <u>SS</u>	ASSESSMENT AMOUNT	PERCENTAGE
5137031029	1315 W. Pico Blud.		708.68	0.41%
		TOTALS	708.68	0.41%
YES, I wa	nt my property(ies) to be	included in this Bu	siness Improve	ement District.
Property Owner's Name (Please Print or Type) Property Owner's OR Duly Authorized Representative's Signature Title (Please Print or Type) Date				
I,, hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true, correct, and complete to				

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

MONTH

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER:	Contrevas Adam			
APN NUMBER	SITE ADDRI	ESS	ASSESSMENT AMOUNT	PERCENTAGE
5136005011	1800 W. Pico Blud.		1.030.72	0.59%
		TOTALS	1,030.72	0.59%
YES, I wa	ant my property(ies) to be	included in this Bu	isiness Improv	ement District.
	Property Owner's Name (Please Print or Type) Duly Authorized Representative's Signature Title (Please Print or Type) Date	7ap 03/1/18	onteras	
State of California the liens (assessment a	F AUTHORITY TO SIGN THIS F .EARLY , hereby certify (or hat I am legally authorized as own amounts) on the property(ies) lister vledge as of	declare) under penalty er, or legal representati d above. This statemen Petitioner Signatu	of perjury under the ve of owner, to acc t is true, correct, an	e laws of the ept the levy of

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: _ LUSTER BRADLEY A TA

APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5075007028	ZLUSZ W PICO BLUD	#	363.57	0.21%
5075 007027	2662 W PICO BUYD		307.16	0.18%
		TOTALS	670.73	0.39%

YES, I want my property(ies) to be included in this Business Improvement District. **Property Owner's Name** BRANLEY (Please Print or Type) Property Owner's <u>OR</u> Duly Authorized Representative's Signature Title OWNER (Please Print or Type) Date STATEMENT OF AUTHORITY TO SIGN THIS PETITION - (Must be completed by petition signer) I. BANDE A LOST hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true correct, and complete to 0 the best of my knowledge as of Petitioner Signature

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

Please Return To: BLQ-PICO PBID FORMATION COMMITTEE 1934 Wilson Avenue Arcadia, Ca 91006 FAX 626-836-0867

Dain / Brodly Luster

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: WSTER VOLIS 1 12.

APN NUMBER	SITE ADDRESS	ASSESSMENT AMOUNT	PERCENTAGE
3674005003	2958 W. PICO BLUD	\$711.08	0.41%
5074005002	VISZW. MEG BUD	£399.02	0.73%
	TOTALS	1,110.10	0.64%

·	
YES, I want my property(ies) to be i	ncluded in this Business Improvement District.
Property Owner's Name (Please Print or Type)	Donis T. L. usten
Property Owner's <u>OR</u> Duly Authorized Representative's Signature	Dociet. Listy
Title (Please Print or Type)	Tre
Date	2-8-18
STATEMENT OF AUTHORITY TO SIGN THIS P	ETITION – (Must be completed by petition signer)
, hereby certify (or c	declare) under penalty of perjury under the laws of the
State of California that I am legally authorized as owner	er, or legal representative of owner, to accept the levy of above. This statement is true, correct, and complete to
the best of my knowledge as of	

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: LUSTER RUTKIN CATHIE L. TR ET AL

APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5074005022	2748 W. ACO BUD.		# 37.36	0.18%
		TOTALS	\$ 307.36	0.18%

YES, I want my property(ies) to be in	ncluded in this Business Improvement District.	
Property Owner's Name (Please Print or Type) Property Owner's <u>OR</u> Duly Authorized Representative's Signature Title	CATHIE RUTKIN	
(Please Print or Type)	owner	
Date	2-7-18	
STATEMENT OF AUTHORITY TO SIGN THIS P	ETITION – (Must be completed by petition signer)	
I. <u>CATHIE RUTKIO</u> , hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true, correct, and complete to the best of my knowledge as of <u>OQ 107 1 QU18</u> . Petitioner Signature.		

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

Please Return To: BLQ-PICO PBID FORMATION COMMITTEE 1934 Wilson Avenue Arcadia, Ca 91006 FAX 626-836-0867

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PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: St. JOPHIA FOUNDATION

the best of my knowledge as of

HINCM

APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5075009021	1324 S. NORMANDIE AVE		\$5,486.74	3.15/
5075011022	2700 W. 14TH ST		\$874.27	.50%
		TOTALS	6,361.01	3.65%

YES, I want my property(ies) to be included in this Business Improvement District. FOUNDATION SOPHIA **Property Owner's Name** SAINT (Please Print or Type) Property Owner's OR Duly Authorized Representative's Signature OF SAINT SOPHIA Title DEAN CATHEDRAL (Please Print or Type) Date 2018 STATEMENT OF AUTHORITY TO SIGN THIS PETITION - (Must be completed by petition signer) BAKAS, hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true, correct, and complete to

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

12018 Petitioner Signature:

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: Tavakoli Ed Company Trust

APN NUMBER	SITE ADDRESS	ASSESSMENT AMOUNT	PERCENTAGE
5076018019	2377 W. Pico Blvd.	761.91	0.44%
	TOTALS	761.91	0.44/6

YES, I want my property(ies) to be	included in this Business Improvement District.
Property Owner's Name (Please Print or Type)	Tayaboli Family Trust
Property Owner's <u>OR</u> Duly Authorized Representative's Signature	
Title (Please Print or Type)	Adtrogized Signatory
Date	3/1/18
STATEMENT OF AUTHORITY TO SIGN THIS F	PETITION – (Must be completed by petition signer)

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true_correct, and complete to

the best of my knowledge as of

hereby certify (or declare) under penalty of perjury under the laws of the

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: TAVAKOLI ED COMPANY TRUST TAVAKOLI FAMILY TRUST

APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5076018019	2377 W PICO BWD	(761.91	.44 %
		TOTALS	\$761.91	.44 -/-

YES, I want my property(ies) to be	included in this Business Improvement District.	
Property Owner's Name (Please Print or Type)	Marc Tavakoli	
Property Owner's <u>OR</u> Duly Authorized Representative's Signature	75hi	
Title (Please Print or Type)	Authorized Agent	
Date	1/24/18	
STATEMENT OF AUTHORITY TO SIGN THIS F	PETITION – (Must be completed by petition signer)	
I, Market Learner, hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true, correct, and complete to		
the best of my knowledge as of 1 1 2 4 1 1 9 Petitioner Signature:		

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: LA CITY PURYGROUND

APN NUMBER	SITE ADDRESS	ASSESSMENT AMOUNT	PERCENTAGE
5075014900		3,077.40	1.77 1/
	TOTALS	\$3,077.40	1.77%

YES, I want my property(ies) to be	included in this Business Improvement District			
Property Owner's Name (Please Print or Type) Property Owner's <u>OR</u> Duly Authorized Representative's Signature	Delay lalu Jesus			
Title (Please Print or Type)	Deputy Chief of Statt			
Date	01/31/2018			
STATEMENT OF AUTHORITY TO SIGN THIS PETITION – (Must be completed by petition signer)				
I,, hereby certify (or declare) under penalty of perjury under the laws of the State of California that I am legally authorized as owner, or legal representative of owner, to accept the levy of liens (assessment amounts) on the property(ies) listed above. This statement is true, correct, and complete to				

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

the best of my knowledge as of

13 1208. Petitioner Signature

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: LA CITY

APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5076019903	2415 W PICO BWD		408.17	. 23 %
5076019902	2401 W PIW BUYD		410.69	. 24 %
	·	TOTALS	\$ 818.86	. 47 %

YES, I want my property(ies) to be	included in this Business Improvement District.
Property Owner's Name (Please Print or Type)	Debby Kilu.
Property Owner's <u>OR</u> Duly Authorized Representative's Signature	08/Vi
Title (Please Print or Type)	Deputy direct or Statt
Date	01/31/2018
STATEMENT OF AUTHORITY TO SIGN THIS	PETITION – (Must be completed by petition signer)
State of California that I am legally authorized as own	declare) under penalty of perjury under the laws of the ner, or legal representative of owner, to accept the levy of

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

liens (assessment amounts) on the property(ies) listed above. This statement is true correct, and complete to

the best of my knowledge as of _

/ 2018. Petitioner Signature

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER: VEGAL JACOB AND GERI S TRUST VEGAL FAMILY TRUST

APN NUMBER	SITE ADDRESS	ASSESSMENT AMOUNT	PERCENTAGE
5135034002	1412 W PIW BLVD	\$256.93	.15 %
	TOTALS	\$ 256.93	. 15 %

YES, I want my property(ies) to be	included in this Business Improvement District.			
Property Owner's Name (Please Print or Type)	Jacob Segal			
Property Owner's <u>OR</u> Duly Authorized Representative's Signature	Dra M. Ricardo			
Title (Please Print or Type)	Business Owner / Prop. Renter			
Date	01-24-2018			
STATEMENT OF AUTHORITY TO SIGN THIS PETITION – (Must be completed by petition signer)				
State of California that I am legally authorized as own				

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.

PURSUANT TO (SECTION 36600 ET. SEQ OF THE CALIFORNIA STREETS AND HIGHWAYS CODE)

LEGAL OWNER:	1350 TICO 1630C	-(HIL)		
APN NUMBER	SITE ADDRESS		ASSESSMENT AMOUNT	PERCENTAGE
5/35 335020	1330 W. BICO BI	o du	16,00.90	349%
		TOTALS	6,090,90	3.49%
YES, I wan	nt my property(ies) to be inclu	uded in this Bu	usiness Improv	ement District
	Property Owner's Name (Please Print or Type)	1774 ST2	ASSOCIATE	15,40
Property Owner's <u>OR</u> Du	uly Authorized Representative's Signature	1	./	
	(Please Print or Type)	1AVASEN	Ž.	
	Date 2	13/18		
STATEMENT OF	AUTHORITY TO SIGN THIS PETIT	TION – (Must be	completed by pet	ition slgner)
I EN LA	hereby certify (or declar	are) under penalty	of perjury under the	e laws of the
liens (assessment am	t I am legally authorized as owner, or ounts) on the property(ies) listed abo	ve. This statemen	t is true, correct, an	ept the levy of a complete to
the best of my knowle	dge as of 2 / 3 / 18.	Petitioner Signatu	ire://	

NOTE: ALL FIELDS MUST BE COMPLETED. PETITIONS WITH EMPTY FIELDS WILL BE REJECTED.